



# Student-Athlete Registration Form

Form: 40.30.3.2.3  
2009-2010

Student Number										
Last Name										
First Name								Initial(s)		
Gender	M	F	Date of Birth						Ht.	Wt.
				mth	day	year				

## LOCAL ADDRESS

Street											
City						Province					
Postal Code						Country					
Phone					e-mail						

## PERMANENT ADDRESS

Street											
City						Province					
Postal Code						Country					
Phone					e-mail						
Hometown											

Academic Year: 2009-2010	University										
Course						Year of Study (1-5)					
Sport						Academic Year of high school / CEGEP graduation:					

Please indicate all previous post-secondary institutions you have attended and in what years (inclusive of CEGEP, college, etc):

Please indicate all previous (semi) professional teams you have participated with and in what years:

Total Number of Years of Eligibility (or equivalent) Used Previously (circle one):	0	1	2	3	4
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*\* The information collected in this form is used and disclosed by Canadian Interuniversity Sport ("CIS") in accordance with the terms of CIS' Student Athlete Acknowledgement Form and CIS' Personal Information Protection Policy. For further information about CIS' collection, use and disclosure of personal information, see our Personal Information Protection Policy at [www.universitysport.ca](http://www.universitysport.ca)*